| | IN THE CIRCUIT COURT OF THE SECOND JUDICIAL CIRCUIT, IN |
|--|--|
| STATE OF FLORIDA | AND FOR LEON COUNTY, FLORIDA |
| STATE OF TEORIDA | CASE NO. |
| v. | SPN: |
| | 51 14. |
| WAIVER OF APPEARANCE | |
| I hereby waive my personal appearance in the conscheduled for, 20 | |
| I enter this waiver with the acknowledgment an | nd understanding of the following: |
| · · | attorney. I understand the nature of the proceeding ve discussed with my attorney any questions I have |
| (2) This waiver is effective only for to attend all future proceedings unless my perso proceeding. I cannot waive my personal appear | ** |
| (3) It is my responsibility to maintain on notify my attorney of any change in my phone | contact with my attorney. It is my responsibility to number or address. |
| in my address. I understand that the Clerk of C | y the office of the Clerk of Court of any change ourt will notify me of scheduled court appearances lerk of Court. My failure to appear at any future ed for my arrest. |
| I have read the above conditions of my waiver with my attorney. I understand these conditions and I and this waiver with the understanding that my personal apphas forced or threatened me to enter this waiver, and I am I feel it is in my best interest. This waiver is signed. | earance is unnecessary for this proceeding. Noone a entering this waiver freely and voluntarily because |
| I hereby certify that I am counsel for the Defen nature of this waiver and the proceedings that shall be his personal presence. I believe the Defendant understan contact with me and appear at all future proceedings. I and voluntarily and with a full and complete understand | ds this waiver and the requirements that he maintain believe the Defendant is entering this waiver freely |

Counsel for the Defendant